



Gelclair

Literary Review



June 2015 to August 2015

Title	Publication	Date	Overview
How will I be after my operation for oral cancer?	British Journal of Oral and Maxillofacial Surgery, Vol. 53, No. 6, pages 538-545.	July	Article shares data from a study of 1,060 head and neck cancer patients measuring their quality of life following curative operations, looking at aspects such as swallowing, chewing and taste. Results were stratified by clinical stage and use of radiotherapy and the best results were reported by patients with early stage tumours who did not require radiotherapy.
Vitamin E intake from natural sources and head and neck cancer risk	British Journal of Cancer, Vol. 113, No. 1, pages 182-192.	30 June	Findings from a study suggest that greater vitamin E intake from foods may lower head and neck cancer risk. Although it is said that further studies are needed, the data points to a protective role of foods rich in vitamin E, including vegetable oils, vegetables and eggs, on cancers of the oral cavity, pharynx and larynx.
A simple breath test to detect certain types of cancer	Gastrointestinal Nursing, Vol. 13, No. 6, page 6.	July/ August	Scientists have developed a breath test that could diagnose oesophageal cancer in minutes. In a study, the test, which looks for chemical compounds, was able to discriminate between malignant and benign oesophageal cancer in patients.
Patient-reported outcomes during and after definitive chemotherapy for oesophageal cancer	British Journal of Cancer, Vol. 113, No. 4, pages 603-610.	11 August	UK researchers have examined the impact definitive chemoradiotherapy (CRT) has on the health-related quality of life (HRQoL) of oesophageal cancer patients, looking at aspects such as dysphagia, eating and dry mouth. The data suggests that the HRQoL recovery after definitive CRT is quicker and there is little lasting deficit compared with treatment including surgery.
Light or moderate drinking and alcohol related cancers	The BMJ, No. 8022, page 7.	22 August	Results from two US studies have shown that light to moderate drinking was associated with an increased risk of alcohol attributable cancers, including cancer of the oral cavity, pharynx, larynx and oesophagus.

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Literary Review, cont.



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GPs urged to test half a million more for cancer	Pulse, page 20.	July	Article examines the new NICE guidelines for suspected cancer. GPs can now request an urgent (within two weeks) upper gastrointestinal endoscopy to check for signs of oesophageal cancer. People over 55 with weight loss - not necessarily progressive and unintentional - should be investigated if they have dyspepsia, upper abdominal pain or reflux.
Psychological needs of people living with cancer	Nursing Standard, Vol. 29, No. 44, pages 50-57.	1 July	A CPD guide which discusses best practice in psychological assessment and intervention for cancer patients. The author argues that unmet mental health needs have an adverse effect on a patient's ability to cope with their illness and states that data has identified a higher incidence of suicide in patients with oral, pharyngeal and lung cancers.
New treatments for Barrett's Oesophagus	Gastrointestinal Nursing, Vol. 13, No. 5, page 12.	June	Researchers in Warwick have found that in patients with Barrett's Oesophagus, medical therapies and continuous monitoring are more effective in identifying and preventing oesophageal cancer than surgery. It is thought the findings will help to identify patients at risk of developing cancer early.
Increasing incidence of base of tongue cancers from 2000 to 2010 due to HPV	British Journal of Cancer, Vol. 113, No. 1, pages 131-134.	30 June	Results from a demographic study in Denmark showed an increased number of HPV-positive base of tongue squamous-cell carcinoma (BSCC) cases. Over a 10 year period incidence of BSCCs increased by 5.4% per year. This was explained by a significant increase in the number of HPV-positive BSCCs (8.1% per year), whereas the number of HPV-negative BSCCs did not increase significantly. The overall HPV prevalence was 51%.

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Alcohol and why we should care for the public's health	Gastrointestinal Nursing, Vol. 13, No. 5, pages S11-15.	June	Article explores the changing patterns of alcohol consumption and the wider impact of alcohol in society. It reports that alcohol causes cancers of the mouth and throat and how, in 2013, alcohol related deaths registered in the UK were recorded as 14.0 deaths per 100,000 population. The authors call for earlier intervention by nurses and midwives.
In brief	Nursing Standard, Vol. 29, No 10, page 10.	10 June	An oral health guide to help community nurses working with homeless people has been published. It states that substance misuse, poor nutrition and a lack of toothpaste and toothbrush can contribute to gum disease and mouth cancer.
Acceptability and safety of telemedicine to assess patients before chemotherapy	Cancer Nursing Practice, Vol. 14, No. 6, pages 20-24.	July	Patients have responded favourably to a home web-based system developed to capture data on toxicity and quality of life, usually collected in pre-chemotherapy clinics. Results from a trial showed that the system reduced hospital visits and clinicians were impressed by the alert systems in place and the fact that the toxicity assessments were continuous and delivered in real time.
Stop smoking services must adopt "e-cigarettes," says Public Health England	The BMJ No. 8022, page 1.	22 August	A review commissioned by Public Health England has recommended that stop smoking services should support smokers who choose to quit by using e-cigarettes, despite them being unlicensed. The review concludes that e-cigarettes were at least 95% less harmful than tobacco. A pilot scheme is underway in Leeds and London with e-cigarettes devices being issued free of charge.
E-cigarettes: Public Health England's evidence-based confusion	The Lancet, Vol. 386, No. 9996, page 928.	29 August	Article argues against the above PHE recommendation for stop smoking services to promote the use of e-cigarettes. The author suggests that the research used was methodically weak and that there were conflicts of interest.

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References: 1. Innocenti M et al. *J Pain Symptom Manage* 2002; 24(5): 456-457. 2. McLean M. Poster presented at the British Association of Head and Neck Oncology Nurses National Study Day on Sharing Good Practice in Head and Neck Cancer Nursing, 12 June 2009. 3. Gibson et al. Presented at SIOP 2010. 4. Kantardžić N et al., *The Internet Journal of Oncology* 2009; 6(2). 5. Data on file: Patient online feedback. Correct as of January 2014.

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Pharmaceuticals

Medical device incidents should be reported. Reporting information can be found at www.mhra.gov.uk
Adverse events should also be reported to Pharmacovigilance at Alliance Pharmaceuticals
(tel: 01249 466 966, email: pharmacovigilance@alliancepharma.co.uk)


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